⚠️ **This is only a summary.** For more information about your coverage, or to get a copy of the complete terms of coverage, [insert contact information]. For general definitions of common terms, such as **allowed amount, balance billing, coinsurance, copayment, deductible, provider,** or other **bolded** terms see the **Glossary**. You can view the Glossary at **www.[insert].com** or call 1-800-[insert] to request a copy.

Important Questions	Answers	Why this Matters:
What is the overall deductible?	$	You must pay all the costs up to the **deductible** amount before this **plan** begins to pay for covered services you use. Check your policy or plan document to see when the **deductible** starts over (usually, but not always, January 1). The Common Medical Events chart below shows how much you pay for covered services after you meet the **deductible**.
Are there other deductibles for specific services?	Yes. $	You must pay all of the costs for these services up to the specific **deductible** amount before this **plan** begins to pay for these services.
Is there an out-of-pocket limit on my expenses?	Yes. $	The **out-of-pocket limit** is the most you could pay during a coverage period (usually one year) for your share of the cost of covered services. This limit helps you plan for health care expenses.
What is not included in the out-of-pocket limit?		Even though you pay these expenses, they don't count toward the **out–of–pocket limit**.
Does this plan use a network of providers?	Yes. For a list of **preferred providers**, see www.[insert].com or call 1-888-123-4567.	If you use an in-network health care **provider**, this **plan** will pay some or all of the costs of covered services. Lesser coverage, or no coverage, may be available for out-of-network **providers**. Be aware, your in-network doctor or hospital may use another out-of-network **provider** for some services (such as lab work).
Do I need a referral to see a specialist?	Yes.	This **plan** will pay some or all of the costs to see a **specialist** for covered services but only if you have the plan's permission before you see the **specialist**.